

## PART B - FEE(S) TRANSMITTAL

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60613 7596 09/13/2009

MCCARTER & ENGLISH, LLP WILMINGTON  
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 405 N. King Street, 8th Floor  
 WILMINGTON, DE 19801

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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/550,621	11/03/2005	Oliver Lohse	PR/4-33150A	5464

TITLE OF INVENTION: PROCESS FOR THE PREPARATION OF 5-(HALOETHYL)-8-(SUBSTITUTED OXY)-1(H)-QUINOLIN-2-ONES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEES DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	09/14/2009
EXAMINER	ART UNIT	CLASS-SUBCLASS				
SEAMAN, D MARGARET M	1625	546-157000				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTX/MSB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTX/MSB/47, Rev.03/02, or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Gozette M. McAvoy

2. \_\_\_\_\_

3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Novartis AG , Basel Switzerland Assignment Recorded: 9/3/09 Reel/Frame: 023188/0946

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

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 Publication Fee (No small entity discount permitted)  
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 190134 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(e)(3).

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60,457

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